Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	<u>11-21-08</u>	Address:	10757 Grand River Rd
Case #:	<u>35F28396</u>		Newburgh, In
County:	<u>Warrick</u>		<u>47630</u>
Type of Laboratory Seizure (check one) Operational Lab Chemical/Glassware/Equipment (only) Dumpsite (only)		Scizure Location (c Residence Outbuilding Vehicle	theck all that apply) Hotel/Motel Open - No Structure Other:
Items Found: Location (bedroom, kitchen, open air, etc) (check all that apply) Lithium/Ammonia Reaction(s): Red Phosphorous/Iodine Reaction(s): Flammable Solvents: Garage Water Reactive Metal (Lithium): Anhydrous Ammonia: Hydrochloric Acid Gas Generator(s): Back yard Corrosive Acid: Garage Corrosive Base: Other (item and location):			
☐ Yes ☐ No *If yes, fax rep This report Fire Departn Health Depa	r age 18 discovered (check one) (number present) out to Child Protective Services is to be faxed to the following agenument: Newburgh FD urtment: Warrick County stion Service: N/A	☐ Ephodrine ☐ Rotail/Me ☑ Other: <u>Cos</u>	<u>cation</u> : 3-0489
For further information regarding this methamphetamine laboratory, contact Investigating Officer: Doug Humphrey Phone 812-867-2079			

This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.

*** This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.